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APPLICATION NO.	LICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/791,192 03/02/2004			Todd O. Bolken		4794.4US (01-0185.04/US)			196b	
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563) ☐ Change of correspondence address for Change of Correspondence Address for PIOSB*1(22) attached. ☐ PEe Address' indication (or "Fee Address' Indication form FIOSB*1(27) attached. FIOSB*1(37) Rev 0.01.02 or more recent) attached, Use of a Customer Number is required. Number is required.			(1) the names of up to or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent attolisted, no name will be	1) the numes of up to 3 registred patent attorneys 2) the nume of a single firm thoring as a member a gainst GR, alternatively. 2) the nume of a single firm thoring as a member a gainstead attorney or agenty and the names of up to make a single firm thoring as a member a gainstead attorney or agenty and the name is 3					
3 ASSIGNEE NAME A PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI	less an assignee is identified in 37 CFR 3.11. Com	A TO BE PRINTED ON tifled below, no assignee pletion of this form is NO	THE PATENT (print or ty) data will appear on the p T a substitute for filing an (B) RESIDENCE: (CIT)	atent. If an assig assignment.	nce is it	lentified below, the	document ha	as been filed for	
(1)	MICRON TECHN	OLOGY INC	Roise	, Idaho					
Piesse check the approp		r categories (will not be p		-	orporati	on or other private g	roup entity	Government	
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Advance Order -	# of Copies		The Director is hereby overpayment, to Depo	authorized to ch sit Account Num	arge the ber2	nequired fee(s), any d 0-1469 (enclose	an extra cop	y of this form)	
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